

# Health Alert Notice

Wyoming Department of Health

September 15, 2009

(WDH SF HAN 6.0)

## Novel Influenza A H1N1 (Swine-like) Virus

### **\*NEW UPDATES:**

#### **- Influenza antiviral treatment and prophylaxis recommendations**

The WDH reminds all healthcare providers that influenza is a reportable disease. In order for public health to gain a better understanding of the epidemiology of total influenza activity we are asking providers to report all cases of influenza to the WDH (fax disease report form to 307-777-5573 or call 307-777-8640).

### **Influenza Antiviral Treatment and Prophylaxis Recommendations**

#### **Treatment**

Clinical judgment is an important factor in treatment decisions. Most patients who have had novel H1N1 influenza infection have had a self-limited respiratory illness similar to typical seasonal influenza. Persons with suspected novel H1N1 influenza or seasonal influenza who present with an uncomplicated febrile illness generally do not require treatment. However, some groups appear to be at increased risk of influenza-related complications.

1. Treatment is recommended for all hospitalized patients with confirmed, probable or suspected novel H1N1 or seasonal influenza.
2. Treatment generally is recommended for patients who are at higher risk for influenza-related complications.
3. Treatment should be initiated empirically when the decision is made to treat patients who have illnesses that are clinically compatible with influenza. Treatment should not await laboratory confirmation because laboratory testing can sometimes delay treatment and because a negative rapid test does not rule out influenza.

#### **Prophylaxis**

The infectious period for persons infected with the novel H1N1 virus appears to be similar to that observed in studies of seasonal influenza. Infected persons may shed influenza virus, and potentially be infectious to others, beginning one day before they develop symptoms to up to 7 days after they become

ill. Children, especially younger children, can shed influenza virus for longer periods. However, for this guidance, the *infectious period* for influenza is defined as one day before until 24 hours after fever ends.

- Post exposure antiviral chemoprophylaxis with either oseltamivir or zanamivir can be considered for the following:
  - Persons who are at higher risk for complications of influenza and are a close contact of a person with confirmed, probable, or suspected novel H1N1 or seasonal influenza during that person's infectious period.
  - Healthcare personnel, public health workers, or first responders who have had a recognized, unprotected close contact exposure to a person with confirmed, probable, or suspected novel H1N1 or seasonal influenza during that person's infectious period.
- Antiviral agents should not be used for post exposure chemoprophylaxis in healthy children or adults based on potential exposures in the community, school, camp or other settings.
- Chemoprophylaxis generally is not recommended if more than 48 hours have elapsed since the last contact with an infectious person.
- Chemoprophylaxis is not indicated when contact occurred before or after, but not during, the ill person's infectious period as defined above. (See <http://www.cdc.gov/h1n1flu/recommendations.htm> )